FINANCIAL STATUS REPORT

(Long Form)

1 Faderal Accomunad O	(Follow instruction	ons on the beat			
Federal Agency and Organizational Element to Which Report is Submitted  Denali Commission	Federal Grant or Other Ide     By Federal Agency     205-06	entifying Number Assigne	-5 2001 NOS	OMB Approval Page of No. 0348-0039	
3. Recipient Organization (Name and complete ad	dress, including ZIP code)	1 / / / / /	— <i>— [3]</i> —	pages	
Juneau Economic Development Counci 612 W. Willoughby Ave., Suite A, Junea	]	S. S	TI COMPANY		
4. Employer Identification Number 94-3053042	5. Recipient Account Number 001-3097382	er or Identifying Number	6. Final Report ☐ Yes ☑ No	7. Basis  Cash Accrual	
Funding/Grant Period (See instructions)     From: (Month, Day, Year)     3/31/2006	To: (Month, Day, Year) 6/30/2007	Period Covered by the From: (Month, Day, 1/1/2007)		To: (Month, Day, Year) 3/31/2007	
10. Transactions:		I Previously Reported	I This Period	III Cumulative	
a. Total outlays		136,481.18	29,689.14		
b. Refunds, rebates, etc.			# · <del> · ·</del>	0.00	
c. Program income used in accordance with the				0.00	
d. Net outlays (Line a, less the sum of lines b	and c)	136,481.18	29,689.14	166,170.3 <u>2</u>	-
Recipient's share of net outlays, consisting of: e. Third party (in-kind) contributions				0.00	
f. Other Federal awards authorized to be used to match this award				0.00	
g. Program income used in accordance with the sharing atternative	ne matching or cost	<del> </del>		0.00	
h. All other recipient outlays not shown on lines e, f or g		72,682.46	21,599.65	94,282.11	
i. Total recipient share of net outlays (Sum of lines e, f, g and h)		72,682.46	21,599.65	94,282.11	
j. Federal share of net outlays (line d less line	i)	63,798.72	8,089.49	71,888.21	
k. Total unliquidated obligations					
Recipient's share of unliquidated obligations	······································		<del> </del>		
m. Federal share of unliquidated obligations					
n. Total Federal share (sum of lines j and m)				71,888.21	
o. Total Federal funds authorized for this funding period			·	100,000.00	
p. Unobligated balance of Federal funds (Line	o minus line n)			28,111.79	
Program income, consisting of:					
Disbursed program income shown on lines     Disbursed program income using the additi					
s. Undisbursed program income	• • •				
t. Total program income realized (Sum of line	s q, r and s)			0.00	
a. Type of Rate (Place "X" ii		etermined	☐ Final	☐ Fixed	1
11. Indirect Provision  Expense b. Rate	c. Base	d. Total Amount	е.	Federal Share	1
Remarks: Attach any explanations deemed governing legislation.	necessary or information requ	iired by Federal sponsori	ng agency in compliand	e with	
13. Certification: I certify to the best of my known unliquidated obligations are	-		mplete and that all ou	tlays and	
Typed or Printed Name and Title Lance Miller, Executive Director	Telephone (Area code, number and extension) 907-463		Len		
Signature of Authorized Certifying Official			Date Report Submitted March 30, 2007		
Previous Edition Usable 269-104				Standard Form 1971	3
NSN 7545-01/012-4285	200-498 P.	O. 139 (Face)	Prescribed by	OMB Circulars 22 and A-110	THE
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